

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Zhao Yang :
Serial No.: : Art Unit: Not yet assigned
Filed: May 19, 2006 : Examiner: Not yet assigned
For: COLLIMATOR AND :
RADIATION IRRADIATOR :

PATENT PRACTITIONER(S) DESIGNATION UNDER
37 CFR 1.32 (c)(3)

Mail Stop: PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In compliance with 37 CFR 1.32(c)(3), Applicants respectfully request that the Commissioner recognize the following Patent Practitioners as being of record before the U.S. Patent and Trademark Office in the Patent Application of: Zhao Yang; Docket No. 16CN-X0107:

Patrick W. Rasche (Reg. No. 37,916), John S. Beulick (Reg. No. 33,338), , Robert B. Reeser III (Reg. No. 45,548), and Phillip A. Shipley (Reg. No. 51,357), all of Armstrong Teasdale LLP, One Metropolitan Square, St. Louis, MO 63102; Michael A. Della Penna (Reg. No. 45,697), Peter Vogel (Reg. No. 41,363), and Carl B. Horton (Reg. No. 34,622), all of GE Medical Systems, 3000 North Grandview Blvd., W-710, Waukesha, WI 53188; and Henry J. Policinski (Reg. No. 26,621) and Scott R. Hayden (Reg. No. 41,821), of General Electric Company, 3135 Easton Turnpike, Fairfield, CT 06828.

all of which are designated in the Declaration and Power of Attorney submitted herewith.

Respectfully submitted:



Michael Tersillo, Reg. No.: 42,180
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DECLARATION AND POWER OF ATTORNEY	Attorney Docket No. 16CN-X0107
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**Attorney Docket No.
16CN-X0107**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **COLLIMATOR AND RADIATION IRRADIATOR**,
the specification of which:

(check one) [] is attached hereto.
[] was filed on _____ as Application Serial No. _____,
and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119 (a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED	CERTIFIED COPY ATTACHED
				Yes No
				Yes No
				Yes No
				Yes No

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose material information as defined in 37 CFR §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. PARENT APPLICATION OR PCT PARENT NUMBER	PARENT FILING DATE (day, month, year)	STATUS (patent and number, pending, abandoned)
PCT/CN2003/000985	20, November, 2003	pending

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

APPLICATION NUMBER(S)	FILING DATE (day, month, year)

 Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

DECLARATION AND POWER OF ATTORNEY

Attorney Docket No.
16CN-X0107

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Patrick W. Rasche (Reg. No. 37,916), John S. Beulick (Reg. No. 33,338), Dean D. Small (Reg. No. 34,730), Robert B. Reeser III (Reg. No. 45,548), Thomas M. Fisher (Reg. No. 47,564), Bruce T. Atkins (Reg. No. 43,476), Daniel M. Fitzgerald (Reg. No. 38,880), Michael Tersillo (Reg. No. 42,180), William J. Zychlewicz (Reg. No. 51,366); Michael G. Harms (Reg. No. 51,780), Rozell Williams, Jr., (Reg. No. 44,403), and Evan R. Sotiriou (Reg. No. 46,247), all of Armstrong Teasdale LLP, One Metropolitan Square, St. Louis, MO 63102; Michael A. Della Penna (Reg. No. 45,697), Peter Vogel (Reg. No. 41,363), and Carl B. Horton (Reg. No. 34,622, all of GE Medical Systems, 3000 North Grandview Blvd., W-710, Waukesha, WI 53188; Ronald E. Myrick (Reg. No. 26,315), Henry J. Policinski (Reg. No. 26,621), and Scott R. Hayden (Reg. No. 41,821), all of General Electric Company, 3135 Easton Turnpike, Fairfield, CT 06431;

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application and any patent issued thereon.

SOLE OR FIRST INVENTOR:

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SECOND JOINT INVENTOR, IF ANY:

Full Name: _____

Signature: _____

Date: _____

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Citizenship: _____

Post Office Address: _____

THIRD JOINT INVENTOR, IF ANY:

Full Name: _____

Signature: _____

Date: _____

Residence: _____

Citizenship: _____

Post Office Address: _____